



**REQUEST
FOR
CONTINUED EXAMINATION (RCE)
TRANSMITTAL**

To Commissioner For Patents

Please enter the following submission and withdraw the finality of the proceeding office action or withdraw any pending appeal and reopen prosecution before the Examiner.

| | |
|------------------------|------------------|
| Application Number | 09/703,419 |
| Filing Date | NOVEMBER 1, 2000 |
| First Named Inventor | ERIC COHEN-SOLAL |
| Group Art Unit | 2612 |
| Examiner Name | KELLY L. JERABEK |
| Attorney Docket Number | US000287 |

This is an RCE under 37 C.F.R. § 1.114 of the above-identified application (which is made prior to: payment of issue fee; abandonment; notice of appeal to the CAFC; or commencement of civil action under 35 U.S.C. 145 or 146.)

1. **Submission required under 37 C.F.R. § 1.114**

a. ☒ **Previously submitted**

i. ☒ **Consider the supplemental amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on October 4, 2004** (Any unentered amendment(s) referred to above will be entered).

ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____

iii. ☐ Other _____

b. ☐ **Enclosed**

i. ☐ Preliminary Amendment

ii. ☐ Affidavit(s) Declaration(s)

iii. ☐ Information Disclosure Statement

iv. ☐ Other _____ (may not be a brief)

2. **Miscellaneous**

a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months. (May not exceed 3 months; Fee required per 37 C.F.R. § 1.117(i))

b. ☐ Other _____

3. **Fees**

a. ☒ The Commissioner For Patents is hereby authorized to charge all required fees except the issue fee or credit any overpayments, to Deposit Account No. 14-1270

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

| | | | |
|-------------------|--------------------------|-----------------------------------|------------------|
| Name (Print Type) | GREGORY L. THORNE | Registration No. (Attorney/Agent) | 39,398 |
| Signature | <i>Gregory L. Thorne</i> | Date | December 2, 2004 |

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, Box RCE, Alexandria, VA 22313, or facsimile transmitted to the U.S. Patent and Trademark Office tel#: _____ on the date below:

| | | | |
|-------------------|--------------------|------|---------|
| Name (Print Type) | NOEMI CHAPA | Date | 12/2/04 |
| Signature | <i>Noemi Chapa</i> | | |

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